34 Maple Street
Milford, Massachusetts 01757

DECLARATION AND POWER OF ATTORNEY

As the inventor, I hereby declare that: my residence, post office address and citizenship is as stated below next to my name of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS AND APPARATUS FOR DETERMINING THE PRESENCE OR ABSENCE OF A FLUID LEAK

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign/PCT Applications and Any Priority Claims Under 35 U.S.C. 119:			
Filing Date	Country	Priority Claim d Under 35 U.S.C. 119?	
March 1, 2002	WO	March 2, 2001	
	Filing Date	Filing Date Country	

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION (35 U.S.C. § 119(e))

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

Applicant	Provisional Application Number	Filing Date
Joseph A. Luongo	60/272,934	March 2, 2001

POWER OF ATTORNEY: As named inventor, I hereby appoint the following attorney(s) with full powers of association, substitution and revocation to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Anthony J. Janiuk (Reg. No. 29,809)

Lin B. Ols n (R g. No. 41,230)

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2 0 1	FULL NAME OF INVENTOR	Luongo	First Joseph	A.
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I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature of Inventor 201:	Date:	, 2003	

2 0 2	FULL NAME OF INVENTOR	Last name Ciavarinni	First Steven	J.
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hereby further declare that all statements made herein of my own knowled and belief are believed to be true; and further, that these statements were m	_	
the like so made are punishable by fine or imprisonment, or both, under Sesuch willful false statements may jeopardize the validity of the application of	ction 1001 of Title 18 of the United St	
Signature of Inventor 202:	Date:	. 2003

FULL NAME	LAST NAME	First	MIDDLE NAME
OF INVENTOR	Tacconi	Robert	Q.
	1 accom		
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belief are be like so made h willful false	dieved to be true; and further, that these are punishable by fine or imprisonment, e statements may jeopardize the validity of	statements were made with the knowled or both, under Section 1001 of Title 1 of the application or any patent issued	edge that willful false statements and 8 of the United States Code, and that
FULL NAME	LAST NAME		MIDDLE NAME
OF INVENTOR	Rubino	Frank	A.
CITIZENSHIP	CITY	STATE	COUNTRY
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belief are be like so made h willful false	elieved to be true; and further, that these e are punishable by fine or imprisonment, e statements may jeopardize the validity of	statements were made with the knowle or both, under Section 1001 of Title 1 of the application or any patent issued	edge that willful false statements and 8 of the United States Code, and that thereon.
nature of	Inventor 204:	Date	e:, 2003
nature of	Inventor 204:	Date	.:, 2003
FULL NAME	LAST NAME		MIDDLE NAME
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FULL NAME OF INVENTOR CITIZENSHIP USA POST OFFICE ADDRESS	Dumas CITY Upton POST OFFICE ADDRESS	Robert STATE Massachusetts of my own knowledge are true and that	MIDDLE NAME J. COUNTRY USA STATE OR COUNTRY AND ZIP CODE Massachusetts 01568 tall statements made on information
	POST OFFICE ADDRESS reby further belief are beliek so made a willful falso nature of INVENTOR CITIZENSHIP USA POST OFFICE ADDRESS reby further belief are beliek so made	Tacconi CITIZENSHIP CITY Medfield USA POST OFFICE ADDRESS 142 South Street Teby further declare that all statements made herein of belief are believed to be true; and further, that these like so made are punishable by fine or imprisonment, in willful false statements may jeopardize the validity of mature of Inventor 203: FULL NAME OF INVENTOR Rubino CITIZENSHIP CITY Milford USA POST OFFICE ADDRESS 243 Central Street Teby further declare that all statements made herein of belief are believed to be true; and further, that these like so made are punishable by fine or imprisonment,	Tacconi Tacconi Tacconi Robert Tacconi Robert Tacconi Robert Tacconi Robert Tacconi Robert Tacconi Robert Massachusetts Post office Address 142 South Street Treby further declare that all statements made herein of my own knowledge are true and that belief are believed to be true; and further, that these statements were made with the knowled in willful false statements may jeopardize the validity of the application or any patent issued that the property of the application or any patent issued that the property of the prop

Signature of Inventor 205:_____